

Hospital Quality Reporting Important Dates and Deadlines

	IQR							Validation				
Discharge	HCAHPS	Pop &		Clinical	PC-01 Web-Based	HAI	HAI Validation		Estimated CDAC		Est. Date Records	
Quarter	Submission	Submis	ssion	Submission ^{2,3}	Submission	Submisson ^{2,3}	Templa		Record Reques		Due to CDAC ^{2,3}	
Q3 2020	03-17-2021 ⁵	03-18-2021 ⁵		03-18-2021 ⁵	01-01-2021-	03-18-2021 ⁵	Random: 3-18-2021		Random: 4-14-2		Random: 5-14-2021	
Jul 1-Sep 30					03-18-20215		Targeted: TBD		Targeted: TBI		Targeted: TBD	
Q4 2020	04-07-2021	05-03-2	2021 ⁴	05-17-2021 ⁴	04-01-2021-	05-17-2021 ⁴	Random: 5-03-2021		Random: 6-1-20		Random: 7-1-2021	
Oct 1-Dec 31					05-17-2021 ⁴		Targeted: TBD		Targeted: TBI		Targeted: TBD	
Q1 2021	06-30-2021 08-0		2021 ⁴	08-16-2021 ⁴	07-01-2021-	08-16-2021 ⁴	Random: TBD		Random: TBE		Random: TBD	
Jan 1-Mar 31					08-16-2021 ⁴		Targeted: TBD		Targeted: TBI Random: TBI		Targeted: TBD Random: TBD	
Q2 2021	10-06-2021	11-01-	2021	11-15-2021	10-01-2021- 11-15-2021	11-15-2021	Random: TBD Targeted: TBD					
Apr 1-Jun 30									Targeted: TBI		Targeted: TBD	
Q3 2021	01-05-2022	02-01-	2022	02-15-2022	01-01-2022-	02-15-2022	Random		Random: TBE		Random: TBD	
Jul 1-Sep 30					02-15-2022		Targetec		Targeted: TBI		Targeted: TBD	
Q4 2021	04-06-2022	05-02-2022 ⁴		05-16-2022 ⁴	04-01-2022-	05-16-2022 ⁴	Random		Random: TBE		Random: TBD	
Oct 1-Dec 31					05-16-20224 05-16-2022 Targeted:				Targeted: TBI)	Targeted: TBD	
FY 2022 APU												
Measures/Requirement					Quarters/Dates I				Submission Deadline/Period			
	DACA			Janu	ary 1, 2020-December 31, 2020				April 1, 2021-May 17, 2021 ⁴			
FY 2023 APU												
	es/Requirement				Quarters/Dates I			Submission Deadline/Period				
			wo self-			2Q 2021, 3Q 2021, 4Q 2021)			February 28, 2022			
<u> </u>				ctober 1, 2020-March 31, 2021				May 17, 2021 ⁴				
				Janu	uary 1, 2021-December 31, 2021				April 1, 2022-May 16, 2022 ⁴			
Measures/Requirement					Quarters/Dates I			Estimate	ated CDAC Request Date			
eCQM Validation On					e quarter of data from CY 2020				TBD		TBD	
Acronyms												
APU: Annual Payment Update					FY: Fiscal Year				IQR: Inpatient Quality Reporting			
CDAC: Clinical Data Abstraction Center					HAC: Hospital-Acquired Condition			1	NHSN: National Healthcare Safety Network			
CDC: Centers for Disease Control and Prevention					HAI: Healthcare-Associated Infection				Pop & Samp: Population and Sampling			
CV: Colondor Voor					HCAHPS: Hospital Consumer Assessment of				PC: Derinetal Care			
CY: Calendar Year					Healthcare Providers and Systems				PC: Perinatal Care			
DACA: Data Accuracy and Completeness Acknowledgement					HCP: Healthcare Personnel				RP: Reduction Program			
eCQM: electronic clinical quality measure					HQR: Hospital Quality Reporting			-	TBD: To Be Determined			

¹Required for chart-abstracted measures only.

² Starting with discharge quarter Q1 2020, the HAI measures will no longer be collected, validated, or reported under the Hospital IQR Program. The HAI measures will still occur under the Hospital-Acquired Condition (HAC) Reporting Program and Hospital Value-Based Purchasing (VBP) Program.

³ Chart-abstracted data validation for FY 2023 includes only two quarters: Q3 2020 and Q4 2020.

⁴ Deadline extended due to original deadline falling on a weekend and/or holiday.

⁵ Hospital IQR Program alignment with Medicare Promoting Interoperability Program. For the Hospital IQR Program in FY 2023, hospitals must report at least four eCQMs from each of the two self-selected quarters.

• All dates are subject to change.

• Generally, data must be submitted no later than 11:59 p.m. Pacific Time on the submission deadline with the exception of HCAHPS. HCAHPS must be submitted by 11:59 p.m. Central Time.

• Validation medical records must be received by CDAC no later than 4:30 p.m. Eastern Time. Medical records are submitted to the CDAC according to coversheet instructions.

• Data for clinical measures, eCQMs, population and sampling, DACA, and PC-01 are transmitted within the Hospital Quality Reporting (HQR) Secure Portal.

• HAI Validation Template data are transmitted within the HQR Secure Portal via Managed File Transfer. HAI measure data are submitted to the CDC through the NHSN.